### PUBLIC INSPECTION COPY

Form **990** 

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Open to Public Inspection

А	ror in	e 202 i calendar year, or tax year beginning an	a enaing		
В	Check if applicab	C Name of organization		D Employer identifi	cation number
_		BRISIOL BAI REGIONAL SEAFOOD			
F	Addre chang Name			1 20 26600	11
F	Name chang Initial		In / ::	20-26600	
H	return	,	Room/suite	E Telephone numbe (907) 67	
	Final return termin	-		G Gross receipts \$	1,799,564.
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code  ANCHORAGE, AK 99503		-	
F	lreturn Applid tion			H(a) Is this a group re for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	
$\overline{}$	Tay.ey	empt status: $\square$ 501(c)(3) $\boxed{\mathbf{X}}$ 501(c) ( 6 ) $\blacktriangleleft$ (insert no.) $\square$ 4947(a)(1	) or 527		list. See instructions
		te: NWW BBRSDA COM	701 027	H(c) Group exemptio	
		forganization: X Corporation Trust Association Other	L Year		1 State of legal domicile: AK
	art I	Summary			··
_	T 1	Briefly describe the organization's mission or most significant activities: TO	MAXIMI	ZE THE VALUE	OF THE
Activities & Governance		BRISTOL BAY FISHERY FOR THE BENEFIT OF	ITS MEN	MBERS BY FOC	USING ON
rna	2	Check this box  if the organization discontinued its operations or disp	osed of mor	e than 25% of its net as	ssets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	7
ত	4	Number of independent voting members of the governing body (Part VI, line 1b)			7
es	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		5	4
₹	6	Total number of volunteers (estimate if necessary)			8
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		3,117,981.	1,799,045.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0. 519.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		20,337.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-16,797. 3,121,521.	0. 1,799,564.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,848,594.	1,490,901.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	1,490,901.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		381,306.	445,503.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		0.	0.
ben	h	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)	0.	<u>.</u>	<u> </u>
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		858,023.	354,181.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,087,923.	2,290,585.
	19	Revenue less expenses. Subtract line 18 from line 12		33,598.	-491,021.
Or Sec	3			eginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		5,493,039.	4,997,281.
ASS	21	Total liabilities (Part X, line 26)		337,915.	333,178.
	22	Net assets or fund balances. Subtract line 21 from line 20		5,155,124.	4,664,103.
P	art II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedu			y knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of	which prepare	r has any knowledge.	
		COPY		Data	
Sig		Signature of officer		Date	
He	re	ANDY WINK, EXECUTIVE DIRECTOR  Type or print name and title			
				Date Check	PTIN
D		Print/Type preparer's name  Preparer's signature		Ollook L	<b></b> '
Pai		AUDREY M. LANCE, CPA Quidey M. Cahee	-, CFA	11/9/2022 self-employ	P01381407 92-0043874
	parer	Firm's name THOMAS, HEAD & GREISEN, PC		Firm's EIN	J4-00438/4
US	Only	Firm's address 1400 WEST BENSON BLVD., 400 ANCHORAGE, AK 99503-3683		Dhora na / O	07)272-1571
N 4 -	ا - حالم ر			Priorie no. ( 9	T
ivia	y tne I	RS discuss this return with the preparer shown above? See instructions			X Yes No

Par	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO MAXIMIZE THE VALUE OF THE BRISTOL BAY FISHERY FOR THE BENEFIT OF
	ITS MEMBERS BY FOCUSING ON THE ECONOMIC WELLBEING OF BBRSDA MEMBERS,
	SUPPORTING A SUSTAINABLE BRISTOL BAY COMMERCIAL FISHERY, AND PROVIDING
	THE HIGHEST QUALITY WILD SALMON PRODUCTS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
40	revenue, if any, for each program service reported.  (Code: ) (Expenses \$ 1,090,771 • including grants of \$ 846,735 • ) (Revenue \$ )
4a	(Code: ) (Expenses \$ 1,090,7/1 including grants of \$ 846,735) (Revenue \$ MARKETING: TO CONDUCT MARKETING AND PROMOTION. FROM 1/1/21 TO 1/31/21,
	BBRSDA SUPPORTED PROJECTS THAT PROMOTED CONSUMER AWARENESS OF BRISTOL
	BAY SOCKEYE SALMON IN THE MARKETPLACE AND SUPPORTED BRANDED MARKETING
	EFFORTS. DATA DEMONSTRATING THESE EFFORTS ARE:
	-BOARD FUNDED 12 MARKETING PROJECTS IN FY21 TOTALING \$930,042
	(INCLUDING PROGRAM SUPPORT EXPENSES). THESE PROJECTS FUNDED EFFORTS TO
	EXPAND BBSS BRAND REACH, PROMOTE BBSS IN THE DOMESTIC RETAIL &
	FOODSERVICE MARKETS AND STRATEGIZING EXPANDING OUR GLOBAL PRESENCE.
	-EXECUTED MARKETING PARTNERSHIPS WITH 13 RETAILERS.
	-ORGANIZED AND FACILITATED IN-STORE BBSS PROMOTIONS AT 3,296 RETAIL
	LOCATIONS THROUGH: DISTRIBUTION OF BBSS BRANDED ASSETS INCLUDING:
	RECIPE CARDS, POSTERS, APRONS, CASE CLINGS, ICE SPEARS, INFORMATIONAL
4b	(Code:) (Expenses \$ 486,415 • including grants of \$ 336,535 • ) (Revenue \$)
	SUSTAINABILITY: TO HELP ENSURE THE BIOLOGICAL SUSTAINABILITY OF THE
	BRISTOL BAY SALMON FISHERY, BBRSDA UNDERTOOK THE FOLLOWING
	SUSTAINABILITY EFFORTS FROM 1/1/21 TO 12/31/21:
	-BBRSDA MEMBERS AND ITS BOARD CONSIDER THE PROPOSED PEBBLE MINE AN
	EXISTENTIAL THREAT TO THE BRISTOL BAY SALMON FISHERY. THE ORGANIZATION
	FUNDED SEVERAL EFFORTS PERTAINING TO THE PEBBLE MINE FOCUSED ON
	EXPANDING INFORMATION ABOUT POTENTIAL PROJECT IMPACTS AND SEEKING
	MAXIMUM ENVIRONMENTAL PROTECTIONS FOR SALMON HABITAT IN BRISTOL BAY, INCLUDING:
	LEGAL REPRESENTATION IN A LAWSUIT CHALLENGING THE ENVIRONMENTAL
	PROTECTION AGENCY'S WITHDRAWAL OF ITS PROPOSED DETERMINATION TO PROVIDE
	SAFEGUARDS FOR BRISTOL BAY SALMON HABITAT,
40	(Code: ) (Expenses \$ 277,836 • including grants of \$ 72,240 • ) (Revenue \$ )
70	OUTREACH & ORGANIZATION: TO FOSTER INVOLVEMENT WITH OUR MEMBERS,
	MAINTAIN ORGANIZATIONAL STRUCTURE, IMPROVE FISHERY SAFETY, AND SUPPORT
	OTHER PROGRAMS; THE BBRSDA UNDERTOOK THE FOLLOWING EFFORTS FROM 1/1/21
	TO 12/31/21:
	-IN THE CONTINUATION OF THE COVID-19 PANDEMIC, BBRSDA'S COVID OUTREACH
	EFFORTS WERE FOCUSED ON MAKING MEMBERS AWARE OF ASSISTANCE PROGRAMS
	THEY MAY BE ELIGIBLE FOR.
	-EXECUTED AN ELECTION FOR THREE OPEN BOARD SEATS.
	-TOOK ON THE WEB STORE AND FULFILMENT OF AN ONLINE STORE TO SELL
	BRISTOL BAY SOCKEYE SALMON MERCHANDISE TO MEMBERS AND OTHERS AT (OR
	ROUGHLY AT) COST, IN EFFORT TO EXPAND THE PRESENCE OF OUR BRAND.
	-SPONSORED THE "BRISTOL BAY FISHERIES REPORT" ON THE LOCAL RADIO
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 276,656 • including grants of \$ 235,391 •) (Revenue \$ )
4e	Total program service expenses ▶ 2,131,678.
	Form <b>990</b> (2021)

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		37	
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			$ _{\mathbf{x}}$
•	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		
9	·			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9		x
10	If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		<del>                                     </del>
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X,	10		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.415		x
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		25
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a		20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Part IV Checklist of Required Schedules (continued)

			V	N
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			. v
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
C	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			X
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If			37
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		Х
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Da	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			N <sub>0</sub>
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 15		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
_				

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2</b> b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of qualified intellectual property, did the organization file of one of the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
Ŭ	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
J-	Note: See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b  13c			
		14a		X
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<del></del>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 75		
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

DEVELOPMENT ASSOCIATION, INC.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 7 **b** Enter the number of voting members included on line 1a, above, who are independent \_\_\_\_\_ 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х on Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? X 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records THE FORAKER GROUP - 907-743-1200

Form **990** (2021)

161 KLEVIN STREET, SUITE 101, ANCHORAGE, AK

# DEVELOPMENT ASSOCIATION, INC.

### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

(A)	(B)	l g		((	<del></del>			(D)	(E)	(F)
Name and title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	Individual trustee or director				ted		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		g.	suadi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	dual tr	tional		nploye	st con yee	_	1099-NEC)		and related organizations
	line)	Indivic	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANDREW WINK	50.00								_	_
EXECUTIVE DIRECTOR				Х				144,921.	0.	0.
(2) MICHAEL JACKSON	2.00									
PRESIDENT		Х		Х				7,800.	0.	0.
(3) FRITZ JOHNSON	2.00							2 100	0	•
VICE PRESIDENT		Х		Х				3,100.	0.	0.
(4) NELS URE	2.00	,,						2 000	0	0
DIRECTOR	2.00	Х						2,800.	0.	0.
(5) MARK NIVER	2.00	Х						2,700.	0.	0.
DIRECTOR O'NELLI	2.00	^						2,700.	0.	0.
(6) PATRICK O'NEILL DIRECTOR	2.00	Х						2,500.	0.	0.
(7) REBA TEMPLE	2.00	^						2,300.	· ·	<u> </u>
SECRETARY/TREASURER	2.00	Х		Х				2,000.	0.	0.
(8) TIM COOK	2.00							2,000.	•	
DIRECTOR, TERM ENDED MAY 2021	2.00	x						900.	0.	0.
(9) GEORGE WILSON	2.00							2000		
DIRECTOR		х						800.	0.	0.

Form **990** (2021)

Form	BRISTOL : 990 (2021) DEVELOPM									20-2	6600:	11 F	age <b>8</b>
Par							_			es (continued)			Ŭ
			ою	CCS		<u>a i ii</u> C)	igne	31 C			1	/F\	
	(A)	(B)			•	رر ition	,		(D)	(E)		(F)	
	Name and title	Average		not c	heck	more	than		Reportable	Reportable		Estimat	
		hours per					is bot or/trus		compensation	compensation		amount	
		week		J			1	100,	from	from related		other	
		(list any hours for	recto						the	organization		compens	
		related	or di	es.			ated		organization	(W-2/1099-MIS		from th	
		organizations	ıstee	trust		a	bens		(W-2/1099-MISC/	1099-NEC)	' l	organiza	
		below	ual tr	onal		oloye	.co .ee		1099-NEC)			and rela	
		line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organizat	ions
		iii ic)	ıı	Ë	₩	ě.	ぎょ	요					
							_						
							-						
1b	Subtotal	•						<u> </u>	167,521.		0.		0.
	Total from continuation sheets to Part V								0.		0.		0.
									167,521.		0.		0.
d	Total (add lines 1b and 1c)								<u> </u>				
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed al	bove	e) wh	no r	eceived more than \$100	0,000 of reportab	le		1
	compensation from the organization											1	1
											_	Yes	No
3	Did the organization list any former officer,	director, truste	ee, k	кеу е	emp	loye	e, o	r hig	hest compensated emp	oloyee on			
	line 1a? If "Yes," complete Schedule J for s	such individual										3	X
4	For any individual listed on line 1a, is the su												
•	and related organizations greater than \$15											4	Х
_												_	
5	Did any person listed on line 1a receive or					-						_	v
	rendered to the organization? If "Yes," com	ipiete Schedule	e J f	or su	ıch	pers	son .					5	X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest co	mpensated ind	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of con	npensati	on from	
	the organization. Report compensation for	the calendar y	ear (	endi	ng v	vith	or w	ithir	n the organization's tax	year.			
	(A)				-				(B)			(C)	
	Name and business	address	N	INC	3				Description of s	ervices	Con	npensatio	on

### Section B. Independent Co.

(A) Name and business address	NONE	(B) Description of services	(C) Compensation
Total number of independent contractors (including but	not limited to those lister	d above) who received more than	

Form **990** (2021)

\$100,000 of compensation from the organization

			Check if Schedule O contains a response	or note to any lir	ne in this Part VIII			
			Check if Schedule O contains a response	or note to any iii	(A)  Total revenue	Related or exempt	<b>(C)</b> Unrelated business revenue	Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts		b d e f	All other contributions, gifts, grants, and similar amounts not included above 1f	799,045.				
Son		•	Noncash contributions included in lines 1a-1f		1,799,045.			
<u> </u>		<u>'''</u>	Total. Add lines 1a-11	Business Code	1,733,0131			
Program Service Revenue	2	b						
m S		C						
gra Re		d						
Pro		e f	All other program service revenue					
			Total. Add lines 2a-2f					
	3		Investment income (including dividends, inter other similar amounts)	est, and	519.			519.
	4		Income from investment of tax-exempt bond p					
	5		Royalties	(ii) Personal				
	6		Gross rents 6a Less: rental expenses 6b	(ii) i ersoriai				
			Rental income or (loss) 6c					
			Net rental income or (loss)	<b>•</b>				
			Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
Revenue			Less: cost or other basis and sales expenses 7b					
eve			Gain or (loss) 7c					
Other R			Net gain or (loss)  Gross income from fundraising events (not including \$ of	<u>►</u>				
		b	contributions reported on line 1c). See Part IV, line 18 Less: direct expenses  8a 8b	1				
				<b>&gt;</b>				
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
			Less: direct expenses 9b					
			Net income or (loss) from gaming activities	<b>&gt;</b>				
			Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory					
		_	Trace modifies or (1033) from sales or inventory	Business Code				
sno	11	а						
Miscellaneous Revenue		b						
e el		С						
Σ Ε			All other revenue					
		е	Total. Add lines 11a-11d		1 500 56			<b>5</b> 4.6
	12		Total revenue. See instructions	<b></b>	1,799,564.	0.	0.	519.

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must com	nolete all columns. All other ord	ganizations must complete column (A)

Do :	Check if Schedule O contains a response to tinclude amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	1 242 262	1 242 262		
	and domestic governments. See Part IV, line 21	1,342,362.	1,342,362.		
2	Grants and other assistance to domestic	120 520	120 520		
	individuals. See Part IV, line 22	138,539.	138,539.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	10,000.	10 000		
	individuals. See Part IV, lines 15 and 16	10,000.	10,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	144,921.	127 701	17,220.	
_	trustees, and key employees	144,541.	127,701.	17,220.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	260 7/1	221 172	27 560	
7	Other salaries and wages	268,741.	231,173.	37,568.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	31,841.	27,022.	4,819.	
10	Payroll taxes	31,041.	41,044.	4,017.	
11	Fees for services (nonemployees):				
a	Management	95,638.	79,051.	16,587.	
b	Legal	42,632.	19,031.	42,632.	
C	Accounting	42,032.		42,032.	
	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	7,654.	7,230.	424.	
40	column (A), amount, list line 11g expenses on Sch 0.)	18,941.	18,559.	382.	
12	Advertising and promotion	35,630.	17,594.	18,036.	
13	Office expenses	2,539.	17,354.	2,539.	
14 	Information technology	2,337.		2,333.	
15 10	Royalties	6,330.		6,330.	
16 17	Occupancy	10,554.	10,554.	0,3301	
17 40	Travel	10,334.	10,334.		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	52,996.	52,946.	50.	
19 20	Conferences, conventions, and meetings	52,550.	52,540.	30.	
20 21	Interest				
21 22	Payments to affiliates				
22 23		3,858.		3,858.	
23 24	Other expenses. Itemize expenses not covered	3,030.		3,0301	
<b>24</b>	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	POINT OF SALE / RETAIL	47,571.	47,571.		
a b	PRINTING AND NEWSLETTER	29,496.	21,376.	8,120.	
C	MISCELLANEOUS	342.	,,	342.	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,290,585.	2,131,678.	158,907.	C
<u>25                                    </u>	Joint costs. Complete this line only if the organization	-,,,	_,,		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Pa	πλ	Balance Sheet				
		Check if Schedule O contains a response or note to any lin	e in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		5,493,039.	2	4,997,101
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former offi	cer, director,			
		trustee, key employee, creator or founder, substantial contra	ibutor, or 35%			
		controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified person	s (as defined			
		under section 4958(f)(1)), and persons described in section		6		
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
₹	9	Prepaid expenses and deferred charges			9	180
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a				
	b	Less: accumulated depreciation 10b			10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		5,493,039.	16	4,997,281
	17	Accounts payable and accrued expenses		41,300.	17	90,248
	18	Grants payable	296,615.	18	242,930	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of S			21	
Ś	22	Loans and other payables to any current or former officer, of				
<u>=</u>		trustee, key employee, creator or founder, substantial conti				
Liabilities		controlled entity or family member of any of these persons			22	
5	23	Secured mortgages and notes payable to unrelated third p			23	
	24	Unsecured notes and loans payable to unrelated third parti			24	
	25	Other liabilities (including federal income tax, payables to re				
		parties, and other liabilities not included on lines 17-24). Co				
		of Schedule D	•		25	
	26	Total liabilities. Add lines 17 through 25		337,915.	26	333,178
		Organizations that follow FASB ASC 958, check here				
ces		and complete lines 27, 28, 32, and 33.				
<u>a</u>	27	Net assets without donor restrictions		5,155,124.	27	4,664,103
Ва	28	Net assets with donor restrictions			28	
Ē		Organizations that do not follow FASB ASC 958, check				
Ţ		and complete lines 29 through 33.	•			
SO	29	Capital stock or trust principal, or current funds			29	
set	30	Paid-in or capital surplus, or land, building, or equipment fu			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or of			31	
Ę	32	Total net assets or fund balances		5,155,124.	32	4,664,103
_	33	Total liabilities and net assets/fund balances		5,493,039.	33	4,997,281

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 79</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 29		
3	Revenue less expenses. Subtract line 2 from line 1	3		-49		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5	,15	5,1	24.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	4	,66	4,1	03.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	S,			
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	.,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	ıdit			
	Act and OMB Circular A-133?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	ıdit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

### **SCHEDULE C** (Form 990)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

		)1(c)(4), (5), or (6) organizat				
Nan	ne of orgar		BAY REGIONAL SEA		Empl	loyer identification number
_			MENT ASSOCIATION			20-2660011
Pa	art I-A	Complete if the org	anization is exempt unde	er section 501(c)	or is a section 527 o	organization.
2	Political o	campaign activity expendit	ation's direct and indirect politica ures gn activities		<b>&gt;</b> \$	<u> </u>
Pa	art I-B	Complete if the org	anization is exempt und	er section 501(c)(	3).	
1	Enter the	amount of any excise tax	incurred by the organization und	er section 4955	▶\$	)
2	Enter the	amount of any excise tax	incurred by organization manage	rs under section 4955	<b>▶</b> \$	
3	If the orga	anization incurred a sectio	n 4955 tax, did it file Form 4720 t	or this year?		Yes No
<b>4</b> a	Was a co	rrection made?				Yes No
		describe in Part IV.				
Pa	art I-C	Complete if the org	anization is exempt unde	er section 501(c),		. , , ,
		• •	I by the filing organization for sec	•		<u> </u>
2		0 0	ization's funds contributed to oth	· ·		
_						
3			. Add lines 1 and 2. Enter here ar			
	line 1/b		4400 DOL ( III )		<b>&gt;</b> \$	Yes No
4			<b>1120-POL</b> for this year?			
5		,	tion listed, enter the amount paid	,	•	0 0
		•	omptly and directly delivered to a	• •		•
		•	additional space is needed, provi			
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		(-7	(2)	(-,	filing organization's	contributions received and
					funds. If none, enter -0	promptly and directly delivered to a separate
						political organization.
						If none, enter -0
				-		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Schedule C (Form 990) 2021

20-2660011 Page 2

Part II-A Complete if the organi section 501(h)).		mpt under section			election under
A Check ► if the filing organization expenses, and share of	excess lobbying	expenditures).		group member's nar	me, address, EIN,
B Check I if the filing organization  Limits or  (The term "expenditur"	Lobbying Expe	nditures		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to influence	e public opinion	(grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influence			F		
c Total lobbying expenditures (add lines					
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (ac	ld lines 1c and 1	d)			
f Lobbying nontaxable amount. Enter the	amount from th	e following table in bo	th columns.		
If the amount on line 1e, column (a) or (b)	is: The lob	bying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1e	).		
Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500,0	00 \$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,	000 \$225,00	\$225,000 plus 5% of the excess over \$1,500,000.			
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (enter 2 h Subtract line 1g from line 1a. If zero or i Subtract line 1f from line 1c. If zero or i j If there is an amount other than zero or	less, enter -0- ess, enter -0- n either line 1h or	_	zation file Form 4720		
reporting section 4911 tax for this year		eraging Period Under	· Soction 501/h)		Yes No
(Some organizations that r	nade a section 5		have to complete all o	of the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b	o)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
b	Volunteers?  Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	ı on 501(c)	(5), or se	ection	
	501(c)(6).			Vas	No
	N/			Yes	No X
1	Were substantially all (90% or more) dues received nondeductible by members?			Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			Λ	X
9 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from t t III-B Complete if the organization is exempt under section 501(c)(4), secti			ection	Λ
· u	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3. is
	answered "Yes."		. ( <i>b</i> ) . a	, .,	0 0, 10
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		····		
_	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures. See instructions		5		
	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part I	I-A, lines 1	and 2 (See	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.				
SCI	HEDULE C, PART III-A, LINE				
AS	DISCLOSED ON SCHEDULE B PART I BBRSDA RECEIVED FUN	IDS FRO	M THE	STATE	OF
ALA	ASKA. PURSUANT TO REV. PROC. 98-19, FOR THE PURPOSE	OF ME	EETING	THE	
REÇ	QUIREMENTS OF IRC SECTION 6033(E)(3) THE AMOUNTS RE	PORTE	ON S	CHEDUI	LE B
PAI	RT 1, LINES 1 AND 2 ARE CONSIDERED (SIMILAR AMOUNTS	s) AS A	A RESU	LT OF	
MEI	TING THE 90% TEST SET FORTH IN SECTION 4.03 OF THE	REVE	WE PR	OCEDUF	RE.
			Schedu	ile C (Form	990) 2021

Part IV   Supplemental Information (continued)
BBRSDA CONSIDERS THE FUNDS RECEIVED FROM THE STATE OF ALASKA AS
AUTHORIZED, BUT NOT MANDATED BY ALASKA STATUTE 43.76.380(D) AND REPORTED
ON SCHEDULE B, TO BE WITHIN THE DEFINITION OF (SIMILAR AMOUNTS) CONTAINED
IN SECTION 5.01 OF REV. PROX. 98-19.
ACCORDINGLY QUESTION 1 IN PART III-A HAS BEEN ANSWERED YES.

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection

Name of the organization

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

**Employer identification number** 20-2660011

Schedule D (Form 990) 2021

Par	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		Similar Funds o	r Accounts. Complete if the
	organization answered Tes Off Offices, Fartiv, in	(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year	. ,		.,
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in		eld in donor advised	funds
	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?			Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Ye	s" on Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).		
	Preservation of land for public use (for example, recrea	ation or education)	Preservation of a h	nistorically important land area
	Protection of natural habitat		Preservation of a c	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contrib	ution in the form of	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified historic str	ructure included in (a)		2c
d	Number of conservation easements included in (c) acquired			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or	terminated by the or	rganization during the tax
	year ▶			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the per			
_	violations, and enforcement of the conservation easements i			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, ar	nd enforcing conser	vation easements during the year
-		dition of circlestons and on	£	and the second s
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and er	forcing conservation	n easements during the year
8	▶ \$ Does each conservation easement reported on line 2(d) above	vo patiofy the requiremen	to of acotion 170/h)	(4\/D\/i\
0				
9	and section 170(h)(4)(B)(ii)?			
3	balance sheet, and include, if applicable, the text of the foot		· ·	
	organization's accounting for conservation easements.	note to the organization s	ililailciai stateilleili	to that describes the
Par	t III Organizations Maintaining Collections o	f Art. Historical Tre	easures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	-	,	
1a	If the organization elected, as permitted under FASB ASC 95		enue statement and	I balance sheet works
	of art, historical treasures, or other similar assets held for pul	•		
	service, provide in Part XIII the text of the footnote to its final	·	•	•
b	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:	,		,
	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$
				<b>L</b> 4
2	If the organization received or held works of art, historical tre			
	the following amounts required to be reported under FASB A			· ·
а	Revenue included on Form 990, Part VIII, line 1	-		<b>&gt;</b> \$
b	Assets included in Form 990, Part X			

132051 10-28-21

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

	BRISTOL	BAY REGIO	NAL SEAFOO	D			
Sche	edule D (Form 990) 2021 DEVELOPI	MENT ASSOC	IATION, IN	C.	20-2	660011	Page 2
Par	rt III   Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or Oth	ner Similar Ass	ets(continu	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that make	significant use of it	S	
	collection items (check all that apply):						
а	Public exhibition	d	Loan or exc	hange program			
b	Scholarly research	е		0.0			
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	n how they further t	ne organization's ex	empt purpose in Pa	art XIII.	
5	During the year, did the organization solicit o						
	to be sold to raise funds rather than to be ma		•	•		Yes	☐ No
Par	rt IV Escrow and Custodial Arran						
	reported an amount on Form 990, Par	-	no ii ino organizatio	Tranowered 100 c	orri omi oco, r art i	, 0, 01	
12	Is the organization an agent, trustee, custodi	· · · · · · · · · · · · · · · · · · ·	liary for contribution	s or other assets n	nt included		
ıa						Yes	☐ No
h	on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII				∟	165	NO
Ь	ii res, explain the arrangement in Fart Allia	and complete the for	llowing table.			Amount	
_	Designing helence				10	741100111	
	Beginning balance						
	Additions during the year						
	Distributions during the year						
	Ending balance						
	Did the organization include an amount on Fo		·			Yes	No
	If "Yes," explain the arrangement in Part XIII.						
Pai	rt V Endowment Funds. Complete it					( I a) Four v	ooro book
		(a) Current year	(b) Prior year		(d) Three years back	+	
	Beginning of year balance	2,816,947.	3,373,946.	2,814,470	· · · · ·	<del>-</del>	66,942.
	Contributions			746,284	· · · · · · · · · · · · · · · · · · ·	+	84,722.
	Net investment earnings, gains, and losses	289.	14,813.	61,574	. 45,225	<u>.</u>	19,760.
	Grants or scholarships						
е	Other expenditures for facilities						
	and programs		571,812.	248,382	370,000	. 2	75,000.
f	Administrative expenses						
g	End of year balance	2,817,236.	2,816,947.	3,373,946	2,814,470	. 2,5	96,424.
2	Provide the estimated percentage of the curr		e (line 1g, column (a	ı)) held as:			
а	Board designated or quasi-endowment	100	_%				
b	Permanent endowment	%					
С	Term endowment	%					
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.					
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organization	_	
	by:					Y	es No
	(i) Unrelated organizations					3a(i)	X
	(ii) Related organizations					3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?			3b	
4	Describe in Part XIII the intended uses of the						
Par	rt VI Land, Buildings, and Equipm						
	Complete if the organization answered	d "Yes" on Form 990	), Part IV, line 11a. S	See Form 990, Part	X, line 10.		
	Description of property	(a) Cost or ot		1	Accumulated	(d) Book v	value
		basis (investm	' '		epreciation		
1a	Land					,	
	Buildings						
_	Less sheld improvements						

Schedule D (Form 990) 2021

0.

e Other.

c Leasehold improvements d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.			r ugo C
Complete if the organization answered "Yes" (  (a) Description of security or category (including name of security)			
	(b) Book value	(c) Method of valuation: Cost or end-of-	year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E) (F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-	year market value
(1)			·
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.			
Complete if the organization answered "Yes" of		e 11d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	15)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X   Other Liabilities.	15.)	<b>&gt;</b>	
Complete if the organization answered "Yes" of	on Form 990 Part IV line	a 11e or 11f See Form 990 Part X line 25	
1. (a) Description of liability	5111 51111 550, 1 art 14, iii 16	2 116 61 111. Gee 1 6111 336, 1 art X, iiile 23.	(b) Book value
(1) Federal income taxes			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	<b>.</b>	
2. Liability for uncertain tax positions. In Part XIII, provide			t reports the

Schedule D (Form 990) 2021

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Sche	edule D (Form 990) 2021 DEVELOPMENT ASSOCIATION, I	INC •	Z U -	Z000011 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue pe	r Returr	າ.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	1,799,564.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d	1	2e	0.
3	Subtract line 2e from line 1			1,799,564.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			1,799,564.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses p	oer Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	2,290,585.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			2,290,585.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	0.
5	Total exponence Add lines 2 and 4c. (This must equal Form 990, Part I, line 18.)			2 290 585.

### Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

### PART V, LINE 4:

THE BOARD HAS ESTABLISHED A DESIGNATED FUND FOR THE PURPOSE OF ENSURING
THAT THE ASSOCIATION HAS OPTIONS IRRESPECTIVE OF THE OUTCOME OF ANY ONE
SEASON. THE BOARD HAS DESIGNATED UP TO 25% OF THE ASSESSMENT REVENUE
COLLECTED BY THE STATE OF ALASKA TO BE HELD FOR THE BUDGET RESERVE EACH
YEAR. PRIOR TO EACH FISCAL YEAR, THE BOARD WILL IDENTIFY RESERVE FUNDS
NEEDED FOR SPECIFIC FUTURE NEEDS. THIS RESERVE COMPONENT IS INTENDED TO
HOLD BACK FUNDS FOR FORESEEABLE ORGANIZATIONAL NEEDS. INVESTMENT RESERVE
FUNDS ARE INTENDED TO BE SPENT ON MISSION-APPROPRIATE ACTIVITIES AS THEY
ARISE AND CAN BE DRAWN UPON WITH APPROVAL OF THE BOARD.

Schedule D (Form 990) 2021

### SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

2021
Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

	of the organization					Employer identi	fication number
	STOL BAY REG					00 06600	1 4
	ELOPMENT ASS			taida dha Uaita d Otataa		20-26600	
Part	Form 990, Part IV		ctivities Ou	tside the United States. Comple	te if the organ	ization answered "	Yes" on
1 F		,	maintain recor	ds to substantiate the amount of its gra	inte and other	accietance	
	=	-		the selection criteria used to award the			Yes X No
,	The grantees engionity it	or the grants or a	assistance, and	the selection enteria asea to award the	grants or ass		103 == 10
2 F	For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	arants and o	ther assistance ou	tside the
	Jnited States.		3		J		
3 A	Activities per Region. (TI	ne following Part	t I, line 3 table ca	an be duplicated if additional space is r	eeded.)		
	(a) Region	(b) Number of	(c) Number of			vity listed in (d)	(f) Total
		offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
		in the region	independent contractors	gram services, investments, grants to recipients located in the region)		e specific type (s) in the region	investments
			in the region	recipients located in the region)	OI SEIVICE	(s) in the region	in the region
	Subtotal	0	0				0.
	Γotal from continuation						
	sheets to Part I	0	0				0.
	Fotals (add lines 3a	۱ ,	,				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
			SOCKEYE SALMON PROMOTION EVENT	10,000.	CHECK	0.		
		NORTH AMERICA	I ROMOTTON EVENT	10,000	CHECK	0.		

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
3	Enter total number of other organizations or entities

Schedule F (Form 990) 2021 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (f) Amount of (e) Manner of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

# Schedule F (Form 990) 2021 I Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

### **SCHEDULE I** (Form 990)

Department of the Treasury

**Grants and Other Assistance to Organizations,** Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION INC

Employer identification number 20-2660011

DEVELOPME	NT ASSOCI	ATION, INC.	•				20-2660011
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or as	sistance, and the selec	
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to recipient that received more than	_				anization answered "`	Yes" on Form 990, Parl	t IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALASKA FISHERIES DEVELOPMENT							
FOUNDATION - P.O. BOX 2223 -							EXPANSION PROJECT FOR
WRANGELL, AK 99929	92-0068881	501(C)(3)	30,000.	0.			SYMPHONY OF SEAFOODS
ALASKA MARINE CONSERVATION COUNCIL							
P.O. BOX 101145							CATCH 49 MARKETING AND
ANCHORAGE, AK 99510	92-0155875	501(C)(3)	15,500.	0.			OUTREACH PROJECT
BRISTOL BAY NATIVE CORPORATION							
111 W 16TH AVENUE #400	92-0141709		E0 000	0.			SEATTLE ARENA PARTNERSHIP
ANCHORAGE, AK 99501	92-0141/09		50,000.	0.			SEATTLE ARENA PARTNERSHIP
BRISTOL BAY SCIENCE & RESEARCH							VARIOUS SALMON RESEARCH
INSTITUTE - P.O. BOX 1464 -							AND SUSTAINABILITY
DILLINGHAM, AK 99576	92-0168036	501(C)(3)	130,706.	0.			PROJECTS
				- •			-
CENTRAL PENINSULA REFRIGERATION							
47130 HARVARD AVENUE							
SOLDOTNA, AK 99669	26-0278094		11,000.	0.			RSW APPRENTICE PROGRAM
,			,				
COASTWISE PRESS, LLC							
P.O. BOX 11609							CAPT'N JACK'S TIDE AND
OLYMPIA, WA 98508	02-2460381		17,500.	0.			CURRENT ALMANAC
2 Enter total number of section 501(c)(3) a	and government o	rganizations listed in th	he line 1 table				<b>&gt;</b> 3.
3 Enter total number of other organization							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2021

Part II Continuation of Grants and Oth	er Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COSTCO							
P.O. BOX 34340							
SEATTLE, WA 98124	92-1223280		12,500.	0.			QUICK AND EASY VIDEOS
KDLG							
P.O. BOX 670							
DILLINGHAM, AK 99576	99-0031132		50,000.	0.			FISHERIES REPORT PROJECT
LEADER CREEK FISHERIES							
P.O. BOX 17013							ICE BAG REIMBURSEMENT
SEATTLE, WA 98127	27-4188286		7,264.	0.			PROGRAM
LYNKER							
202 CHURCH STREET #536							HYDROLOGICAL MODEL
LEESBURG, VA 20175	74-3233110		15,000.	0.			PROJECT
MRJ AND ASSOCIATES							
2313 ORELANS DRIVE							
TALLAHASSEE, FL 32308	65-0731908		60,000.	0.			RETAIL CHAIN PROMOTIONS
NODWIEDN EGONOMICG							
NORTHERN ECONOMICS 880 H STREET, SUITE 210							
ANCHORAGE, AK 99501	92-0162195		25,000.	0.			PROCESSOR SURVEY PROJECT
0.0000							
OCEAN BEAUTY SEAFOODS							
P.O. BOX 70739 SEATTLE, WA 98127	20-8899430		15,000.	0.			ICE BARGE PROJECTS
SEATTLE, WA JOIZI	20 0099430		13,000.	· ·			TEE BANGE TROUBETS
OCEAN STRATEGIES							
1122 EAST PIKE STREET #761							GOVERNMENT COMMUNICATIONS
SEATTLE, WA 98122	46-3781584		28,725.	0.			PROJECT
RISING TIDE COMMUNICATIONS							
430 W. 7TH AVENUE SUITE 21							VARIOUS MARKETING
ANCHORAGE, AK 99501	47-2620897		613,789.	0.			PROJECTS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SALMON STATE							CFBB HABITAT PROTECTION
1201 CONNECTICUT AVENUE NW, SUITE 3 WASHINGTON, DC 20036	20-5806345		60,000.	0.			OUTREACH AND COMMUNICATION
SANTA MONICA SEAFOODS							
18531 SOUT BROADWICK STREET							
RACHO DOMINQUEZ, CA 90220	95-3616163		10,000.	0.			RETAIL PROMOS LENT
SEAFOOD ANALYTICS DBA CQ FOODS, INC - 6857 S STAPLES #219 - CORPUS							
CHRISTI, TX 78413	46-5090218		24,680.	0.			CQR PROJECT
SEATTLE FISH COMPANY 6211 E 42ND AVENUE							
DENVER, CO 80216	84-0609104		15,000.	0.			RETAIL PROMOS PROJECTS
TRIDENT SEAFOODS 5303 SHILSHOLE AVENUE NW							ICE BARGE TO IMPROVE
SEATTLE, WA 98107	47-0702463		18,160.	0.			QUALITY OF SALMON
UNIVERSITY OF ALASKA FAIRBANKS 17101 POINT LENA LOOP ROAD							
JUNEAU, AK 99801	92-6000147		13,721.	0.			MACHINE LEARNING PROJECT
UNIVERSITY OF WASHINGTON P.O. BOX 352900							OTOLITH RESEARCH AND HABITAT CONSERVATION
SEATTLE, WA 98195	91-6001537		88,384.	0.			PROJECTS

20-2660011

Schedule I (Form 990) 2021 DEVELOPMENT ASSOCIATION, INC.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CASH FOR ICE SHUTTLE AND RSW APPRENTICE PROGRAM	14	138,539.	0	FMV	
ondir tox tol bhottal and now introduced thousand	1	100,000.			
_					
Part IV Supplemental Information. Provide the information re	 quired in Part I, lir	e 2; Part III, column	l (b); and any other a	I dditional information.	
PART I, LINE 2:					
THE ORGANIZATION MAY PUBLICIZE A	GRANT PRO	JECT AND S	SOLICIT APP	LICATIONS.	
GRANTEE IDEAS MAY ALSO BE BROUGHT	FORWARD	BY INDIVID	UAL PROPOS	AL OR	
REQUEST. ALL GRANTS ARE APPROVED					
SEPARATE GRANT COMMITTEE). ALL GRA	ANTEES SI	GN A GRANT	AGREEMENT	, WHICH	
INCLUDES REPORTING REQUIREMENTS.					
A GRANT MAY INCLUDE INTERIM AND F	INAL REPO	RTING, OR	ONLY FINAL	REPORTING.	

THE GRANT AGREEMENT DESCRIBES THE EXEMPT PURPOSE AND INCLUDES A LIMITATION

Part IV Supplemental Information
ON THE USE OF FUNDS TO THE PURPOSE. IN ORDER TO FACILITATE MORE TIMELY
REPORTING THE ORGANIZATION MAY HOLD BACK 20% TO 50% OF THE TOTAL GRANT
AMOUNT UNTIL A PROGRESS REPORT IS RECEIVED. IF THE REPORT SHOWS APPROPRIATE
PROGRESS THE REMAINDER OF THE GRANT WILL BE REMITTED.

### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC. **Employer identification number** 20-2660011

	·		Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		
	The organization?	5a		
b	Any related organization?	5b		
^	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the net earnings of:	6-		
a	The organization?	6a		
D	Any related organization?	6b		
7	If "Yes" on line 6a or 6b, describe in Part III.			
′	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<u> </u>		
o	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
3	Regulations section 53.4958-6(c)?	9		
	negulations section 33.4930-0(c)?	פ		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of V	V-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & (iii) Other incentive reportable compensation compensation		compensation			reported as deferred on prior Form 990
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)						-	
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021 DEVELOPMENT ASSOCI	ATION, INC.			20-2660011	Page 3
Part III Supplemental Information					
Provide the information, explanation, or descriptions required for Part I, lin	es 1a, 1b, 3, 4a, 4b, 4c, 5a,	5b, 6a, 6b, 7, and 8, and	for Part II. Also complete this	part for any additional information.	
PART I, LINE 3:					
THE BOARD OF DIRECTORS APPROVES EXECU	TIVE DIRECTOR	COMPENSATION	AGREEMENT.		

### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE ECONOMIC WELLBEING OF BBRSDA MEMBERS, SUPPORTING A SUSTAINABLE

BRISTOL BAY COMMERCIAL FISHERY, AND PROVIDING THE HIGHEST QUALITY WILD

SALMON PRODUCTS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CARDS, AND BRANDED APRONS; DEVELOPMENT OF CO-BRANDED PR ASSETS; AND

- -ATTENDED 3 TRADE SHOWS: BOSTON SEAFOOD SHOW, PME, GSE
- -ATTENDED ASMI'S ANNUAL ALL-HANDS (INDUSTRY) MEETING
- -SPONSORED/PARTICIPATED IN 2 MARKETING EVENTS: ALASKA SYMPHONY OF

SEAFOODS AND SEAFOOD 101

SOCIAL MEDIA SUPPORT.

- -ADDED DIGITAL ASSETS TO ONLINE MEDIA LIBRARY
- -SUPPORTED A CONSUMER FACING WEBSITE, AS WELL AS A BBSS FACEBOOK AND

**INSTAGRAM PAGES** 

-COMMISSIONED SOCKEYE MARKET REPORTS AND PRESENTATIONS AT MEMBER

**MEETINGS** 

-CREATION OF NEW VIDEO AND PHOTOGRAPHY ASSETS HIGHLIGHTING THE FISHERY

AND PRODUCT ATTRIBUTES OF BRISTOL BAY SOCKEYE SALMON.

-THE MARKETING COMMITTEE MET 10 TIMES IN SUPPORT OF THE MARKETING

PROGRAM.

- -OVER 300 CONTRACTS ARE SUBSCRIBED TO OUR QUARTERLY NEWSLETTERS
- -FOUR PRESS RELEASES HIT THE WIRE: SALMON COOKING GUIDE, FRESH BRISTOL

BAY SOCKEYE, BRISTOL BAY SOCKEYE SALMON WEEK IN DC, AND BRISTOL BAY

CHOICE AT SYMPHONY OF SEAFOOD

Schedule O (Form 990) 2021 Page **2** 

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

- --LEGAL RESEARCH AND CONSULTING INVOLVING THE PROPOSED MINE PROJECT,
- --STAKEHOLDER OUTREACH AND COMMUNICATION SUPPORT, AND
- --FUNDING FOR A HYDROLOGICAL MODEL OF THE NUSHAGAK WATERSHED THAT THE
  BROADER COMMUNITY CAN USE TO EVALUATE THE EFFECTS OF CLIMATE CHANGE,

  LAND USE MODIFICATIONS, MINERAL DEVELOPMENT, HYDROPOWER DEVELOPMENT, OR

  OTHER STRESSORS TO THIS CRITICAL ECOSYSTEM.

THE BOARD COMMITTED \$49,448 TO THE BRISTOL BAY FISHING COLLABORATIVE,

A GROUP THAT ASSISTS THE ALASKA DEPT OF FISH & GAME TO CONDUCT SALMON

ASSESSMENT PROJECTS AND OTHER SCIENTIFIC RESEARCH IN BRISTOL BAY,

INCLUDING THE FIRST YEAR OF ON-BOARD GENETICS ANALYSIS. FISHERY

MANAGEMENT WAS ALSO SUPPORTED BY PROVIDING \$81,257 FOR EXPANDED

OPERATIONS IN THE PORT MOLLER TEST FISHERY. THESE PROJECTS RESULTED IN

BETTER INFORMATION ABOUT THE SALMON RUN TIMING AND DESTINATION, AS WELL

AS PROVIDING SUPPORT FOR FISHERY MANAGEMENT AND RESOURCE

SUSTAINABILITY.

-BOARD APPROVED FUNDING IN THE AMOUNT OF \$446,205 FOR THE SUSTAINABILITY PROGRAM IN FY21.

-THE SUSTAINABILITY COMMITTEE MET 4 TIMES IN SUPPORT OF THE SUSTAINABILITY PROGRAM.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

STATION IN DILLINGHAM (KDLG), AS WELL AS PSA'S ANNOUNCING BARGE TRAFFIC

TO ENHANCE FISHERMEN SAFETY.

-HELD A PHOTO CONTEST FOR BRISTOL BAY FISHERMEN TO SUPPORT MARKETING EFFORTS AND GATHER MARKETING CONTENT.

-HOSTED WEBINARS WITH TAX SPECIALISTS TO INFORM MEMBERS ABOUT RELEVANT
TAX INFORMATION.

Schedule O (Form 990) 2021 Page 2

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

-OFFERED CREW MEMBER TRAINING BEFORE THE 2021 FISHING SEASON.

- -PUBLISHED MARKET INFORMATION TO THE BBRSDA WEBSITE FOR MEMBERS.
- -PUBLISHED 11 ELECTRONIC NEWSLETTERS AND DISTRIBUTED TO MEMBERS.
- -SURVEYED MEMBERSHIP ABOUT WHAT WERE THE BIGGEST PRIORITIES FOR THE FLEET.

-THE PUBLIC RELATIONS & OUTREACH COMMITTEE MET 4 TIMES IN SUPPORT OF THE PR & OUTREACH PROGRAM.

-BOARD APPROVED \$540,161 IN FUNDING FOR ORGANIZATION AND OUTREACH IN FY21 AND \$314,762 WAS ACTUALLY EXPENDED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

QUALITY: TO IMPROVE QUALITY BY BUILDING THE CAPACITY AND DESIRE IN THE FLEET TO CHILL FISH AT THE POINT OF HARVEST AND ADOPT BEST HANDLING PRACTICES THE BBRSDA UNDERTOOK THE FOLLOWING EFFORTS FROM 1/1/21 TO 12/31/21:

-THE BOARD REVIEWED AND APPROVED FUNDING FOR 11 QUALITY PROJECTS AND
RELATED EXPENSES IN FY21 TOTALING \$253,865, INCLUDING PROJECTS TO
FURTHER ICE PRODUCTION AND IMPROVE ICE DELIVERY AND INCREASE AWARENESS
OF BEST HANDLING PRACTICES SUCH AS:

- --ADDITIONAL ICE PRODUCTION IN TWO DISTRICTS,
- --IMPROVED ICE DELIVERY IN INSULATED BAGS AND TOTES,
- --IMPROVED ICE DELIVERY BY ICE SHUTTLE VESSEL IN ONE DISTRICT,
- --QUALITY AWARENESS INFORMATION SHARED WITH THE FLEET,
- --FISH QUALITY MONITORING AT THE POINT OF DELIVERY USING A NEW

TECHNOLOGY, AND

- -- ANALYSIS OF FISH QUALITY, CHILLING PERFORMANCE AND PRODUCT FORMS.
- -THE ACTUAL TOTAL PAYMENTS MADE FOR THE 11 QUALITY PROJECTS WAS

\$246,110.

-THE QUALITY COMMITTEE MET 4 TIMES IN SUPPORT OF THE QUALITY PROGRAM.

EXPENSES \$ 276,656. INCLUDING GRANTS OF \$ 235,391. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

ALL FISHERMEN IN THE BRISTOL BAY DRIFTNET FISHERY WHO ARE PERMIT HOLDERS

(OTHER THAN THE SETNET FISHERMEN) PAY A SELF-IMPOSED TAX COLLECTED BY THE

STATE OF ALASKA, ARE VOTING MEMBERS OF THE ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7A:

ALL MEMBERS HAVE THE RIGHT TO VOTE FOR THE GOVERNING BODY AND VOTE AT THE ANNUAL MEETING.

FORM 990, PART VI, SECTION B, LINE 11B:

STAFF AND TREASURER REVIEW THE DRAFT FORM 990 AND RECOMMEND ANY REVISIONS.

CPA FIRM PRESENTS TO THE FULL BOARD OF DIRECTORS FOR REVIEW AND APPROVAL

PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS AND THE EXECUTIVE DIRECTOR ARE REQUIRED TO SUBMIT ANNUAL FORMS DISCLOSING ANY POSSIBLE CONFLICT OF INTEREST. THEY ARE ALSO REQUIRED TO DISCLOSE AT ANY TIME DURING THE YEAR WHEN A POSSIBLE CONFLICT OF INTEREST DEVELOPS DUE TO THE ASSOCIATION ENTERING INTO, OR CONSIDERING, NEW BUSINESS RELATIONSHIPS. MEMBERS OF THE BBRSDA BOARD ARE NOT PREVENTED FROM PARTICIPATING IN PROGRAMS OFFERED TO BRISTOL BAY FISHERMAN BECAUSE THEY ARE ON THE BOARD, VOTED TO ESTABLISH THE PROGRAM, OR OTHERWISE PARTICIPATE IN PROGRAM ADMINISTRATION, SO LONG AS THEY ADHERE TO NORMAL PROGRAM REQUIREMENTS MADE APPLICABLE TO ALL PARTICIPANTS. FURTHER, IF A BOARD MEMBER PARTICIPATES IN SUCH A PROGRAM AFTER IT WAS ADVERTISED AND

Schedule O (Form 990) 2021 Page 2

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

MADE AVAILABLE TO ALL BRISTOL BAY FISHERMAN, THEN BOARD STATUS IS NOT

RELEVANT TO PROGRAM PARTICIPATION AND A CONFLICT OF INTEREST NEED NOT BE

DECLARED IN FURTHER DELIBERATIONS CONCERNING PROGRAM ADMINISTRATION.

FORM 990, PART VI, SECTION B, LINE 15A:

BOARD DISCUSSES THE COMPENSATION OF THE EXECUTIVE DIRECTOR. THE

COMPENSATION DELIBERATION AND DECISION IS DOCUMENTED IN THE BOARD MINUTES.

FORM 990, PART VI, SECTION C, LINE 19:

BBRSDA POSTS ON ITS WEBSITE (OPEN TO THE PUBLIC) ITS ARTICLES OF

INCORPORATION, ENABLING STATUTE, BYLAWS, BOARD MINUTES, APPROVED AUDITS,

AND SUMMARY BUDGETS. IT CURRENTLY VIEWS ITS POLICIES AND PROCEDURES AS ITS

OPERATIONAL POLICIES SO DOESN'T POST THOSE TO PUBLIC VIEW, THOUGH MEMBERS

ARE PROVIDED THEM UPON REQUEST.

### PART VIII LINE 1E:

IN MAY 2006 BRISTOL BAY DRIFTNET PERMIT HOLDERS VOTED PURSUANT TO

ALASKA STATUTE 43.76.370 TO APPROVE A 1% SEAFOOD DEVELOPMENT TAX ON THE

EX-VESSEL PRICE OF SEAFOOD SOLD, THE "ASSESSMENT", ON THEIR HARVESTS TO

SUPPORT BBRSDA. THE TAX IS PAID THROUGH THE STATE OF ALASKA AND

APPROPRIATED ANNUALLY AT THE DISCRETION OF THE ALASKA STATE LEGISLATURE

TO BBRSDA AS A GRANT.

THE PASS THROUGH LOCAL OPTION TAX REVENUES APPROPRIATED FROM THE

GENERAL FUND BY THE LEGISLATURE (SALMON DEVELOPMENT TAX) IS CONSIDERED

FINANCIAL ASSISTANCE FOR PURPOSES OF PRESENTATION IN THE SCHEDULE OF

STATE FINANCIAL ASSISTANCE AS REQUIRED BY THE STATE OF ALASKA AUDIT

GUIDE AND COMPLIANCE SUPPLEMENT FOR STATE SINGLE AUDITS.